Diagnosis and Initial Treatment of Ischemic Stroke

ED Treatment Algorithm 16 Enters ED via: · Primary care referral Walk in A = Annotation EMS transport 18 17 Consider IV tissue Neurological yes plasminogen activator deficit present at time of evaluation? (tPA) See Stroke Code algorithm no 19 20 History no suggestive of Out of guideline TIA? yes 21 ED diagnostic evaluation: CBC Glucose Electrolytes ESR · Electrocardiogram · Brain imaging: MRI or CT 23 24 High risk for stroke: Admit to monitored unit • Over age 60 TIA symptoms High risk for Evaluation: yes yes Diabetes within 24 hours? stroke? Carotid imaging: · Motor weakness ultrasound, CTA or MRA · Speech impairment Echocardiogram (if suspect cardioembolic) A · TIA duration 10 minutes or longer no no Acute lesion on diffusion weighted MRI or CT 25 26 Rapid outpatient evaluation or TIA symptoms yes admit to hospital > 24 hours and Evaluation: < 7 days? Carotid imaging: ultrasound, CTA or MRA Echocardiogram (if suspect no cardioembolic) Α 28 27 yes Clinic evaluation TIA symptoms within 1 week > 7 days

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